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			_			
Fill in this information to iden	tify the case:					
United States Bankruptcy Court	for the:					
Distr	ict of(State)					
Case number (If known):	Chapter					
				Check if this is a		
Official Form 205				amended filing		
	etition Against a N	lon-Indi	vidual	12/15		
	otcy case against a non-individual you a					
a case against an individual, use	e the <i>Involuntary Petition Against an Ind</i> ny additional sheets to this form. On the	ividual (Official Fo	orm 105). Be as complete and accura	te as possible. If		
Part 1: Identify the Chapte	er of the Bankruptcy Code Under W	hich Petition Is	Filed			
Chapter of the Bankruptcy Code	Check one:					
Bankruptcy Code	Chapter 7	☐ Chapter 7				
	Chapter 11					
Part 2: Identify the Debtor						
2. Debtor's name						
3. Other names you know						
the debtor has used in the last 8 years						
Include any assumed names, trade names, or doing business as names.						
4. Debtor's federal Employer Identification Number (EIN)						
Number (LIN)	EIN	-				
5. Debtor's address	Principal place of business		Mailing address, if different			
	Number Street		Number Street			
			P.O. Box			
	City	ZIP Code	City State	ZIP Code		
			Location of principal assets, if diff principal place of business	erent from		
	County		Number Street			

City

State

ZIP Code

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De	btorName	Case number (if known)			
6	Debtor's website (URL)				
٥.	Dobtor o wodolio (Ortz)				
		□ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))			
7.	Type of debtor	Partnership (excluding LLP)			
		Other type of debtor. Specify:			
		— Callet type of addicti. Operation.			
8.	Type of debtor's business	Check one:			
		☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))			
		☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))			
		Railroad (as defined in 11 U.S.C. § 101(44))			
		☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))			
		☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))			
		☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))			
		None of the types of business listed.			
		☐ Unknown type of business.			
_	To the best of your				
9.	knowledge, are any	U No			
	bankruptcy cases	Yes. Debtor Relationship			
	pending by or against any partner or affiliate	District Date filed Case number, if known			
	of this debtor?	MM / DD / YYYY			
		Debtor Relationship			
		District Date filed Case number, if known MM / DD / YYYY			
Pa	Report About the	Case			
10.	Venue	Check one:			
		Over the last 180 days before the filing of this bankruptcy, the debtor had a domicile, principal place of business, or principal assets in this district longer than in any other district.			
		☐ A bankruptcy case concerning debtor's affiliates, general partner, or partnership is pending in this district.			
		— A particular of cases controlling desice of animalos, general partition, or particular to pertain girl and desired.			
11	Allegations	Each petitioner is eligible to file this petition under 11 U.S.C. § 303(b).			
	Allegations	The debtor may be the subject of an involuntary case under 11 U.S.C. § 303(a).			
		At least one box must be checked:			
		The debtor is generally not paying its debts as they become due, unless they are the subject of a bona			
		fide dispute as to liability or amount.			
		☐ Within 120 days before the filing of this petition, a custodian, other than a trustee, receiver, or an agent appointed or authorized to take charge of less than substantially all of the property of the			
		debtor for the purpose of enforcing a lien against such property, was appointed or took possession.			
12	Has there been a	□ No			
14.	transfer of any claim				
	against the debtor by or	Yes. Attach all documents that evidence the transfer and any statements required under Bankruptcy			
	to any petitioner?	Rule 1003(a).			

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Debtor					Case number (if known)		
Name							
13. Each petitione	r's claim	Name of petitione	r		Nature of petitioner's cla	aim	Amount of the claim above the value of any lien
							\$
							\$
							\$
					Total of petitioner	's' claims	\$
the top of each additional petiti statement unde along with the s	sheet. Following oning creditor, the penalty of perjuit	the format of this e petitioner's cla	form, set out the info im, the petitioner's re 4 of the form, followe	ormation re	ged debtor's name an equired in Parts 3 and ve, and the petitioner's additional petitioner's	4 of the form fo	r each ude the
			-		on with a bankruptcy c	ase can result in	fines up to
Petitioners reque petitioning creditor	st that an order for or is a corporation,	relief be entered attach the corpora	ate ownership stateme	ler the chapt nt required b	ter of 11 U.S.C. specific toy Bankruptcy Rule 10° rder of the court grantin	10(b). If any petiti	
I have examined	the information in	this document and	I have a reasonable be	elief that the	information is true and	correct.	
Petitioners or Pe	etitioners' Repres	sentative		Attorneys	3		
Name and maili	ng address of pet	itioner					
Name				Printed nan	ne		
Number Street				Firm name,	if any		
City		State	ZIP Code	Number	Street		
Name and maili	ng address of pet	itioner's represe	ntative, if any	City		State	ZIP Code
Name				Contact ph	one	Email	
Number Street				Bar numbe	r		
				State		-	
City	enalty of periury th	State nat the foregoing is	ZIP Code				
·		iat the folegoing is		×			
	Executed on// MM / DD / YYYY			Signature o	of attorney		
Signature of petition	ner or representative,	including representa	ative's title	Date signed	d// MM / DD / YYYY	-	

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Case number (if known)_

Name	
Name and mailing address of petitioner	
Name	Printed name
Number Street	Firm name, if any
City State ZIP Code	Number Street
Name and mailing address of petitioner's representative, if any	City State ZIP Code
Name	Contact phone Email
Number Street	Bar number
City State ZIP Code	State
I declare under penalty of perjury that the foregoing is true and correct.	×
Executed on// MM / DD / YYYY	Signature of attorney
Signature of petitioner or representative, including representative's title	Date signed / / / / / / / / / / / / / / / / / / /
Name and mailing address of petitioner	
Name	Printed name
Number Street	Firm name, if any
City State ZIP Code	Number Street
Name and mailing address of petitioner's representative, if any	City State ZIP Code
Name	Contact phone Email
Number Street	Bar number
City State ZIP Code	
I declare under penalty of perjury that the foregoing is true and correct.	*
Executed on / / / DD / / YYYY	Signature of attorney
Signature of petitioner or representative, including representative's title	Date signed / / / / / / / / / / / / / / / / / / /
·	Date signed/ MM / DD / YYYY

Debtor